

State:	Arkansas	Filing Company:	Philadelphia American Life Insurance Company
TOI/Sub-TOI:	H071 Individual Health - Specified Disease - Limited Benefit/H071.002A Dread Disease - Cancer Only		
Product Name:	C18		
Project Name/Number:	C18/		

Disposition

Disposition Date: 09/25/2012

Implementation Date:

Status: Disapproved

Comment:

We are disapproving your request for a rate increase on this block of business based on the low loss ratio for 2012.

Thank you for your understanding in this matter.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Philadelphia American Life Insurance Company	8.000%	8.000%	\$3,364	62	\$42,055	8.000%	8.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Disapproved	No
Supporting Document (revised)	Exhibits to Actuarial Memorandum	Disapproved	No
Supporting Document	Exhibits to Actuarial Memorandum	Replaced	No
Rate	rate schedule	Disapproved	No

State: Arkansas **Filing Company:** Philadelphia American Life Insurance Company
TOI/Sub-TOI: H07I Individual Health - Specified Disease - Limited Benefit/H07I.002A Dread Disease - Cancer Only
Product Name: C18
Project Name/Number: C18/

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	09/20/2012
Submitted Date	09/20/2012
Respond By Date	

Dear Jerry Mao,

Introduction:

This will acknowledge receipt of the captioned filing.

Objection 1

- Exhibits to Actuarial Memorandum (Supporting Document)

Comments:

It is requested that you provide us with the rate history for Arkansas.

Thank you for your cooperation.

Conclusion:

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

State:	Arkansas	Filing Company:	Philadelphia American Life Insurance Company
TOI/Sub-TOI:	H071 Individual Health - Specified Disease - Limited Benefit/H071.002A Dread Disease - Cancer Only		
Product Name:	C18		
Project Name/Number:	C18/		

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	09/24/2012
Submitted Date	09/24/2012

Dear Rosalind Minor,

Introduction:

Thank you for your attention.

Response 1

Comments:

We have updated the schedule item Exhibit A - Rate Adjustment History to include AR rate history in addition to national history. Document name has been changed as well to reflect this change.

Related Objection 1

Applies To:

- Exhibits to Actuarial Memorandum (Supporting Document)

Comments:

It is requested that you provide us with the rate history for Arkansas.

Thank you for your cooperation.

Changed Items:

Supporting Document Schedule Item Changes
Satisfied -Name: Exhibits to Actuarial Memorandum
Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Thank you. Please feel free to contact me regarding any other issues or inquiries.

Sincerely,

Langston Johnson